Fill	in this information to identify your case:		
Deb	otor 1 Joseph D. Giles		
Det	First Name Middle Name Last Name otor 2 Poppy M. Giles		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEW MEXICO		
1	se number 20-10747-j7 (a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	_	eck if this is an ended filing
Su	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible.		12/15
info	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing am roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
			assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	325,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$ _	589,084.73
	1c. Copy line 63, Total of all property on Schedule A/B	\$	914,084.73
Par	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule	D \$ _	812,223.59
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	47,290.47
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	454,629.98
	Your total liabili	ties \$	1,314,144.04
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,541.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,220.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1	Joseph D. Giles	
Debtor 2	Poppy M. Giles	

Case number (if known) 20-10747-j7

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$	
'	

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	47,290.47
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	47,290.47

Fill in this info						
	ormation to identify	your case and th	is filing:			
Debtor 1	Joseph D. G					
Debtor 2	First Name		e Name	Last Name		
(Spouse, if filing)	Poppy M. Gi First Name		e Name	Last Name		
I Inited States F	Bankruptcy Court for	the: DISTRICT	OF NEW M	MEXICO.		
Office Olates E	Barilla aptoy Court for	uic. <u>BioTritoT</u>	OI IVEW IVI	iExico		
Case number	20-10747-j7					☐ Check if this is
						amended filing
	<u> </u>					
Official F	orm 106A/E	<u> </u>				
Schedu	ile A/B: Pi	roperty				12/15
☐ No. Go to P Yes. Where	, ,	nway 17	What is ti ☐ Sir	the property? Check all that apply ngle-family home uplex or multi-unit building	the amount of any	cured claims or exemptions. Put y secured claims on <i>Schedule D:</i> ave Claims Secured by Property.
				ondominium or cooperative		
			☐ Ma	anufactured or mobile home	Current value of	the Current value of the
Chama	NM	87520-0000	☐ La	and	entire property?	
Gilailia	State	ZIP Code	Inv	vestment property	\$325,00	0.00 \$325,000.0
City			Timeshare			
-			= "			ure of your ownership interest
			☐ Ot	ther		ple, tenancy by the entireties,
			☐ Ot		(such as fee sim a life estate), if k	ple, tenancy by the entireties,
City			Ot Who has	ther	(such as fee sim a life estate), if k Warranty dee	ple, tenancy by the entireties, nown.
-	ba		☐ Ot Who has	ther Check one	(such as fee sim a life estate), if k Warranty dee	ple, tenancy by the entireties, nown. ed to this real property i
City	ba		☐ Ot Who has ☐ De ☐ De ☐ De	ther can interest in the property? Check one ebtor 1 only	(such as fee sim a life estate), if k Warranty dee in names of	ple, tenancy by the entireties, nown. ed to this real property i
City	ba		☐ Ot Who has ☐ De ☐ De ☐ De ☐ At	ther an interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only least one of the debtors and another	(such as fee sim a life estate), if k Warranty dee in names of c Check if this (see instruction	ple, tenancy by the entireties, nown. ed to this real property i Joseph and Poppy Giles s is community property
City	ba		□ Ot Who has □ De □ De □ De □ At Other info	ther can interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only eleast one of the debtors and another formation you wish to add about this iter	(such as fee sim a life estate), if k Warranty dee in names of c Check if this (see instruction	ple, tenancy by the entireties, nown. ed to this real property i Joseph and Poppy Giles s is community property
City	ba		□ Ot Who has □ De □ De □ At Other inf- property Comme	ther chan interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only cleast one of the debtors and another	(such as fee sim a life estate), if k Warranty dee in names of . Check if this (see instruction n, such as local ed a restaurant	ple, tenancy by the entireties, nown. ed to this real property i Joseph and Poppy Giles s is community property s)
City	ba		□ Ot Who has □ De □ De □ At Other inf- property Comme	ther tan interest in the property? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only eleast one of the debtors and another formation you wish to add about this iter identification number: ercial building. Debtors operate	(such as fee sim a life estate), if k Warranty dee in names of . Check if this (see instruction n, such as local ed a restaurant	ple, tenancy by the entireties, nown. ed to this real property i Joseph and Poppy Giles s is community property s)

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

	Joseph D. Giles Poppy M. Giles		Case number (if known)	20-10747-j7
B. Cars, van	s, trucks, tractors, sport utility ve	hicles, motorcycles		
■ Yes				
3.1 Make: Model: Year:	4.0	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	the amount of any se	ed claims or exemptions. Put ecured claims on <i>Schedule D: Claims Secured by Property.</i>
	ximate mileage: 183,000 information:	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see instructions)	\$13,000.C	90 \$13,000.00
3.2 Make: Model:	Grand Prix	Who has an interest in the property? Check one Debtor 1 only	the amount of any se	red claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property.
	2008 ximate mileage: 101,000 information:	□ Debtor 2 only■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	Current value of the entire property?	e Current value of the portion you own?
		■ Check if this is community property (see instructions)	\$3,000.0	\$3,000.00
3.3 Make:	 	Who has an interest in the property? Check one Debtor 1 only	the amount of any se	ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property.
Year:	2013 ximate mileage: 55,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	, ,
Other	illiomation.	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$7,000.0	\$7,000.00
. Watercraf		* * * *	and accessories	90 \$7,000
		n for all of your entries from Part 2, including that number here		\$23,000.00
	cribe Your Personal and Household Ite n or have any legal or equitable in	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples ☐ No	Id goods and furnishings s: Major appliances, furniture, linens Describe	, china, kitchenware		

Official Form 106A/B Schedule A/B: Property page 2 Beds - \$250.00 Dressers - \$300.00 Nightstand - \$25.00

2 dining room tables and chairs - \$200.00

Refrigerator - \$50.00 Freezer - \$50.00

Kitchen appliances - \$250.00 Microwave oven - \$25.00

Couches - \$150.00 Chair - \$100.00 Hutch - \$100.00

Entertainment center - \$100.00

Coffee tables - \$50.00 Lamps - \$25.00 Wine rack - \$50.00 Tanning bed - \$100.00 Washing machine - \$200.00

Dryer - \$200.00

Sewing machine - \$25.00 Vacuum cleaner - \$25.00 Hand tools - \$50.00

\$2,325.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

Televisions - \$250.00 Laptop computer - \$500.00 Printer - \$100.00 Tablets - \$200.00 Cell phones - \$400.00 X-box - \$200.00 Playstation - \$200.00

\$1,850.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

□ No

■ Yes. Describe.....

Books

\$50.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

Yes. Describe.....

Camping equipment - \$100.00 Treadmill - \$100.00 Golf clubs - \$125.00 Bicycle - \$50.00 Guitar - \$50.00

\$425.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Official Form 106A/B

Schedule A/B: Property

page 3

Best Case Bankruptcy

Debtor 1 Debtor 2	Joseph D. Giles Poppy M. Giles Case number (if k	20-10747-j7
■ Yes.	Describe	
	.45 Armscore pistol - \$200.00 Springfield shotgun - \$100.00	\$300.00
□ No	es ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothing and shoes	\$750.00
□ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g Describe	ems, gold, silver
	Wedding rings and costume jewelry	\$500.00
Exam	pres: Dogs, cats, birds, horses Describe	
	Dog	\$100.00
□ No	Cive specific information Equipment of Debtors' former business, G4 High Country Cuisine, LLC: Point of sale system - \$5000.00 Security system - \$8000.00 Sandwich cooler unit - \$500.00 2 fryers - \$600.00 Stove and oven - \$1000.00 Warmer - \$400.00 Steam table - \$1000.00 Stainless steel counters - \$1000.00 Refrigerator - \$500.00 Charboiler - \$500.00 4 walk-in coolers - \$8000.00 Walk-in freezer - \$2000.00 Cookware - \$500.00	\$29,000.00
for P	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	ed \$35,300.00
	escribe Your Financial Assets wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

	btor 1 btor 2	Joseph D. Giles Poppy M. Giles		Case number (if known)	20-10747-j7
١	□ No ·		our wallet, in your home, i	in a safe deposit box, and on hand when you file your petition	n
	_ 100			Cash	\$200.00
ļ	Examp □ No			; certificates of deposit; shares in credit unions, brokerage ho the same institution, list each. Institution name:	ouses, and other similar
		17.1.	Checking account	Bank of America	\$1.95
		17.2.	Savings account	Bank of America	\$91.97
		17.3.	Checking account	Bank of America	\$843.25
		17.4.	Checking account	Washington Federal Bank	\$1,287.71
 19. 	Non-pu joint v	enture	·	e: d and unincorporated businesses, including an interest	in an LLC, partnership, and
ļ	⊔ Yes.	Give specific information Na	me of entity:	% of ownership:	
ļ	Negoti Non-ne ■ No	iable instruments include egotiable instruments are Give specific information	personal checks, cashiers those you cannot transfer	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
		nent or pension accoun ples: Interests in IRA, ERI), thrift savings accounts, or other pension or profit-sharing pl	lans
ı	Yes.	List each account separa Type	itely. of account:	Institution name:	
		Pens	sion	New Mexico Educational Retirement Board retirement account through employment with the Chama Valley Independent Schools (Joseph Giles)	\$102,200.1 4
		Pens	sion	New Mexico Educational Retirement Board retirement account through employment with the Chama Valley Independent Schools (Poppy Giles)	\$22,483.71

Official Form 106A/B Schedule A/B: Property

page 5

	ebtor 1 ebtor 2	Joseph D. G Poppy M. G				_ Ca	ase number (if known)	20-10747-j	j 7
	Your sh <i>Examp</i> □ No	les: Agreement	ed deposits you hav		ou may continue service utilities (electric, gas, was Institution name or indiv	ater), telecor		ies, or others	
	■ Yes		I andland ass			viduai.			\$ 250.00
			Landiord sec	urity deposit	Jose Abeyta, Jr.				\$650.00
			Water securit	y deposit	Village of Chama				\$300.00
			Gas security	deposit	New Mexico Gas Co	ompany			\$80.00
			Electricity se deposit	cuirty	Northern Rio Arriba	a Electric C	Cooperative		\$146.00
	Annuiti ■ No	es (A contract f	or a periodic payme	nt of money to y	ou, either for life or for a	number of y	ears)		
	☐ Yes	ls	ssuer name and des	cription.					
	26 U.S.0		on IRA, in an acco 529A(b), and 529(b		ed ABLE program, or u	nder a quali	fied state tuition pro	gram.	
	■ No □ Yes	lr	nstitution name and	description. Sep	arately file the records o	f any interes	ts.11 U.S.C. § 521(c):		
	Trusts, ■ No	equitable or fu	uture interests in p	roperty (other t	han anything listed in l	line 1), and ı	ights or powers exe	rcisable for y	our benefit
	☐ Yes.	Give specific in	formation about the	m					
					er intellectual property m royalties and licensing		5		
		Give specific in	formation about the	m					
	Ехатр		and other general rmits, exclusive lice		e association holdings, li	iquor license	s, professional license	es	
	■ No □ Yes.	Give specific in	formation about the	m					
М	oney or p	property owed	to you?					portion Do not d	value of the you own? deduct secured or exemptions.
	Tax refo	unds owed to y	you						
		Give specific inf	ormation about ther	n, including whe	ther you already filed the	e returns and	the tax years		
			[ncome tax refund fro evenue Service (esti		Federal		\$2,000.00
			[2		ome tax refund from				
				State of N	lew Mexico (estimate	e)	State		\$500.00

Schedule A/B: Property page 6 Official Form 106A/B

	ebtor 1 ebtor 2	Poppy M. Giles		Case number (if known)	20-10747-j7
29.		support	o sum alimony, spousal support, child support, mainte	_	
	■ No	nes. I ast due of fullip	o sum aimony, spousai support, chilu support, mainte	enance, divorce settlement, property	Settlement
		Give specific informa	tion		
30.			owes you disability insurance payments, disability benefits, sick loans you made to someone else	pay, vacation pay, workers' comper	nsation, Social Security
	_	Give specific informa	ation		
		ts in insurance policibles: Health, disability	cies , or life insurance; health savings account (HSA); cre	dit, homeowner's, or renter's insurar	nce
	Yes.	Name the insurance	company of each policy and list its value.		
			Company name:	Beneficiary:	Surrender or refund value:
			Texas Life Insurance Company term life insurance policy (no cash value)	Joseh Giles	\$0.00
			Texas Life Insurance Company term		
			life insurance policy (no cash value)	Poppy Giles	\$0.00
			AXA Equitable Life Insurance Company		
			term life insurance policy (no cash value)	BBVA USA Bank	\$0.00
32.	If you a		at is due you from someone who has died a living trust, expect proceeds from a life insurance p	oolicy, or are currently entitled to rece	eive property because
	■ No				
	☐ Yes.	Give specific informa	ation		
33.	Examp	against third partie	s, whether or not you have filed a lawsuit or made byment disputes, insurance claims, or rights to sue	e a demand for payment	
	■ No	Describe each claim			
		Describe each claim			
34.	Other c	contingent and unlic	quidated claims of every nature, including counter	rclaims of the debtor and rights to	set off claims
	_	Describe each claim			
35	Any fin	ancial assets you d	id not already list		
JJ.	■ No	ianciai assets you u	id not alleady list		
	☐ Yes.	Give specific informa	ation		
36			l of your entries from Part 4, including any entries ber here	. • •	\$130,784.73
D.o	rt 5: Des	scriba Any Business B	elated Property You Own or Have an Interest In. List any	real estate in Part 1	
				rour cotate iii Fait I.	
	Do you o No. Go		or equitable interest in any business-related property?		
_		o to Part 6. So to line 38.			

Official Form 106A/B Schedule A/B: Property page 7

Debte Debte	· ·		Case number (if known)	20-10747-j7
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
16. D	o you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
ı	No. Go to Part 7.			
[Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership No			
	Yes. Give specific information			
	Other seeds of Debteral former	husiness CAlliel	Country Cuicino	
	Other assets of Debtors' former LLC:	business, G4 Higi	1 Country Cuisine,	
	Liquor license - \$400,000.00			\$400,000.00
54.	Add the dollar value of all of your entries from Part 7. Write tha	nt number here		\$400,000.00
Part 8	List the Totals of Each Part of this Form		·	
55.	Part 1: Total real estate, line 2			\$325,000.00
56.	Part 2: Total vehicles, line 5	\$23,000.00		
57.	Part 3: Total personal and household items, line 15	\$35,300.00		
58.	Part 4: Total financial assets, line 36	\$130,784.73		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$400,000.00		
62.	Total personal property. Add lines 56 through 61	\$589,084.73	Copy personal property to	stal \$589,084.73
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$914.084.73

Fill in this inform	mation to identify your	case:		
Debtor 1	Joseph D. Giles			
	First Name	Middle Name	Last Name	
Debtor 2	Poppy M. Giles			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXICO		
Case number	20-10747-j7			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2013 Toyota 4-Runner Line from Schedule A/B:	\$13,000.00		\$6,000.00	11 U.S.C. § 522(d)(2)
				100% of fair market value, up to any applicable statutory limit	
	2008 Pontiac Grand Prix Line from Schedule A/B:	\$3,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)
	Elle Holli ochedate AVD.			100% of fair market value, up to any applicable statutory limit	
	2008 Pontiac Grand Prix Line from Schedule A/B:	\$3,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Household goods and furnishings, electronics, books, camping	\$5,400.00		\$5,400.00	11 U.S.C. § 522(d)(3)
	equipment, treadmill, golf clubs, bicycle, guitar, clothing and shoes Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
	Jewelry (wedding rings and costume jewelry)	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

Debtor 1 Debtor 2 Joseph D. Giles Poppy M. Giles Case number (if known)

tor 2 Poppy M. Giles			Case number (if known)	20-10/4/-J/
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Texas Life Insurance Company term life insurance policy (no cash value)	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Texas Life Insurance Company term life insurance policy (no cash value)	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
AXA Equitable Life Insurance Company term life insurance policy	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
(no cash value) Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
New Mexico Educational Retirement Board retirement account through	\$102,200.14		\$102,200.14	11 U.S.C. § 522(d)(10)(E)
employment with the Chama Valley Independnent Schools (Joseph Giles) Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
New Mexico Educational Retirement Board retirement account through	\$22,483.71		\$22,483.71	11 U.S.C. § 522(d)(10)(E)
employment with the Chama Valley Independent Schools (Poppy Giles) Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B:	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking account at Bank of America	\$1.95		\$1.95	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Savings account at Bank of America Line from Schedule A/B:	\$91.97		\$91.97	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking account at Bank of America	\$843.25		\$843.25	11 U.S.C. § 522(d)(5)
ine from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Checking account at Washington Federal Bank	\$1,287.71	•	\$1,287.71	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
_andlord security deposit with Jose Abeyta, Jr.	\$650.00		\$650.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	_		100% of fair market value, up to any applicable statutory limit	

20-10747-j7

Joseph D. Giles Debtor 1 20-10747-j7 Debtor 2 Poppy M. Giles Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Water security deposit with the 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 Village of Chama Line from Schedule A/B: П 100% of fair market value, up to any applicable statutory limit Gas security deposit with New 11 U.S.C. § 522(d)(5) \$80.00 \$80.00 **Mexico Gas Company** Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit **Electricity deposit with Northern Rio** 11 U.S.C. § 522(d)(5) \$146.00 \$146.00 **Arriba Electric Cooperative** Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit 2019 federal income tax refund from 11 U.S.C. § 522(d)(5) \$2,000.00 \$2,000.00 the Internal Revenue Service (estimate) 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit 2019 state income tax refund from 11 U.S.C. § 522(d)(5) \$500.00 \$500.00 the State of New Mexico (estimate) Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit 2013 Buick LaCrosse 11 U.S.C. § 522(d)(5) \$7,000.00 \$7,000.00 Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit .45 Armscore pistol and Springfiled 11 U.S.C. § 522(d)(5) \$300.00 \$300.00 shotgun Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit Dog 11 U.S.C. § 522(d)(5) \$100.00 \$100.00 Line from Schedule A/B: 100% of fair market value, up to any applicable statutory limit Liquor license of Debtors' former 11 U.S.C. § 522(d)(5) \$13,299.12 \$400.000.00 business, G4 High Country Cuisine, LLC 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Nο

Yes

Fill	in this infor	mation to identify you	ır case:				
Deb	otor 1	Joseph D. Giles	3				
		First Name	Middle Name	Last Name		-	
		Poppy M. Giles				_	
(Spoi	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ba	ankruptcy Court for the	: DISTRICT OF NEW MEXICO			-	
Cas	e number	20-10747-i7					
(if kno	_	•				☐ Check	if this is an
						amend	ded filing
Ощ	:.: -	400D					
Sc	hedule	D: Creditors	Who Have Claims	Secure	d by Propert	у	12/15
is ne numb	eded, copy th per (if known)	e Additional Page, fill it .	out, number the entries, and attach it				
	_ `			r achadulas V	ou have nothing also t	to roport on this form	
	_		·	i scriedules. 10	ou nave nothing else	to report on this form.	
	Yes. Fill in	n all of the information	below.				
Pari	List A	III Secured Claims				0.1	
	,	·	· ·		value of collateral.	claim	If any
2.1			· · · ·		\$804,432.63	\$754,000.00	\$50,432.63
	Creditor's Nam	le	2289 S. New Mexico Highw Chama, NM 87520 and	yay 17			
			•				
			1				
	Poppy M. Giles Fish Name Middle Name Last Name						
	P O Box	797808	As of the date you file, the claim is:				
			Seph D. Giles Name				
	,		•				
Who	owes the d	ebt? Check one.					
	Debtor 1 only		An agreement you made (such as	mortgage or sec	cured		
	Debtor 2 only		car loan)				
	Debtor 1 and D	ebtor 2 only		echanic's lien)			
A	At least one of	the debtors and another	☐ Judgment lien from a lawsuit				
	Check if this c		Other (including a right to offset)			800,000.00 obtained	d for

Last 4 digits of account number

3900

August,

Date debt was incurred 2016

Debt			_	Case number (if known)	20-10747-j7	
Daha		ame Last Name				
Debt	. opp, o o	nma Last Nama	_			
	First Name Wildlie No.	arrie Last Name				
2.0	Citizens One Auto					
2.2	Finance	Describe the property that secures	the claim:	\$7,227.14	\$13,000.00	\$0.00
	Creditor's Name	2013 Toyota 4-Runner				
	D.O. Day 42022	As of the date you file, the claim is:	Check all that	J		
		apply.				
	Number, Street, City, State & Zip Code					
Who	owes the deht? Check one					
_						
_	•		mortgage or	secured		
_	•	_ ′	echanic's lien)			
	•	<u> </u>	,			
_		_	Secured	vehicle loan for \$33,5	07.20 obtained in Ju	ne,
		— Other (including a right to onset)	2015.	. ,		•
	-					
Date	debt was incurred June, 2015	Last 4 digits of account num	ber <u>242</u>	0		
	1					
2.3	_	B	41 1 . 1	\$563.82	\$10.00	¢553 93
				1	Ψ10.00	Ψ000.02
	Creditor 3 Name					
	P.O. Poy 1027		Check all that	J		
		apply.				
		<u> </u>				
	Number, Street, City, State & Zip Code					
Who	owes the debt? Check one					
_		_		a a a u wa d		
_	•		mortgage or	Secured		
		′	echanic's lien)			
_	•					
_		_	Lease of	sian for Debtors' form	ner business. G4 Hid	ah
		Other (including a right to offset)		_		
	November,	Describe the property that secures the claim: \$7,227.14 \$13,000.00 \$0.00 2013 Toyota 4-Runner As of the date you file, the claim is: Check all that apply. Gordingent				
Condition's Name Condition's						
	·					
	biblio 2 Poppy M. Giles Finance Crestitor's Name Citizens One Auto Finance Crestitor's Name Citizens One Auto Finance Crestitor's Name Crestit					
	Modify Name Modify Name Last Name Citizens One Auto Finance Crestors Name Describe the property that secures the claim: \$7,227.14 \$13,000.00 \$0.00 \$0.00 P.O. Box 42033 Providence, RI 02940 Commonstrate the date you file, the claim is: Check all that apply. And of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured call relative to a community debt Last 4 digits of account number Describe the property that secures the claim: Statutory live live in the claim relates to a community debt Configuration of the debtors and another heak if this claim relates to a community debt Describe the property that secures the claim: Statutory live in such as tax lien, mechanics lien) June, 2015 Last 4 digits of account number Describe the property that secures the claim: Statutory live in such as the claim is: Check all that apply. Last 4 digits of account number 2420 Norther Leasing Systems, Inc. Creation's Name Describe the property that secures the claim: Statutory live in the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Describe the property date secures the claim: Statutory live in the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Describe the property claim is: Check all that apply. Statutory live (such as tax lien, mechanics lien) Desputed Once on the debtors only Last 4 digits of account number P.O. Box 1027 Sloux Falls, SD 57101 Confingent Uniquidated Desputed Once of live Check on on. Nature of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. Statutory live (such as tax lien, mechanics lien) Uniquidated Desputed Other (including a right to offset) Lease of sign for Debtors' former business, G4 High Countr					
	biblot 2 Poppy M. Giles Citizens One Auto Describe the property that secures the claim: \$7,227.14 \$13,000.00 \$0.00					
Part	First Name Mode Name Last Name Citizens One Auto Finance Citizens One Auto Finance Citizens One Auto Finance Citizens One Auto Finance Condition's Name 2013 Toyota 4-Runner 2015 Toyota 4-Runner 2016 Torothory Name 2017 Toyota 4-Runner 2018 Toyota 4-Runner 2019 Toyota 4-Runner 2010 Toyota 4-Runner 2010 Toyota 4-Runner 2010 Toyota 4-Runner 2015 Toyota 4-Runner 2015 Toyota 4-Runner 201					
trying than	g to collect from you for a debt you of one creditor for any of the debts that	we to someone else, list the creditor you listed in Part 1, list the addition	in Part 1, an	d then list the collection age	ency here. Similarly, if you	have more
	Name Number Street City State 9 7	7in Code	_			
	Adam Nach, Esq.	Lip Code	On v	which line in Part 1 did you ent	er the creditor? 2.1	
	2001 East Campbell Avenue	•	Last	4 digits of account number		
	Suite 103				_	
	Phoenix, AZ 85016					

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this informatio	n to identify your o	case:					
Del	otor 1	20-10747-j7 Check if this is an amended filing Check Ch						
			Middle Name	Last Nam	Э			
De	otor 2	oppy M. Giles						
(Spo	ed States Bankruptcy Court for the: DISTRICT OF NEW MEXICO e number 20-10747-j7 Check if this is an amended filing							
Uni	ted States Bankrup	otcy Court for the:	DISTRICT OF NEW MEXICO					
Ca	se number 20-1	0747-j7						
(if kr	nown)	-					_	
Of	ficial Form 10	06E/F						
Sc	hedule E/F:	Creditors W	ho Have Unsecured	Claim	S			12/15
Scho left. nam	edule D: Creditors W Attach the Continua e and case number	/ho Have Claims Sect tion Page to this pag (if known).	ured by Property. If more space is r e. If you have no information to rep	needed, co	py the Part	you need, fill it out, i	number the entries in	the boxes on the
١.	_	ive priority unsecured	u ciainis against you?					
2.	identify what type of possible, list the clair Part 1. If more than of	claim it is. If a claim ha ns in alphabetical orde one creditor holds a pa	is both priority and nonpriority amount or according to the creditor's name. If y rticular claim, list the other creditors in	ts, list that o you have m n Part 3.	claim here a nore than tw	nd show both priority a	nd nonpriority amount	s. As much as
	(For an explanation o	of each type of claim, s	ee the instructions for this form in the	Instruction	booklet.)	Total claim		
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other parany executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write you name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) N.M. Taxation and Revenue Department Last 4 digits of account number 1000 \$12,984.43 \$12,984.43 \$2.	\$0.00							
	Attn: Bankr	uptcy Section	When was the debt inc	curred?	2018			
			As of the date you file	the eleim	io. Ob a als a	II dhadaaa h		
		•	_	, the claim	is: Check a	ш тпат арріу		
	Debtor 1 only		_					
	Debtor 2 only							anded filing 12/15 List the other party to Form 106A/B) and on at are listed in the boxes on the nal pages, write your For each claim listed, bunts. As much as antinuation Page of Nonpriority amount
		ehtor 2 only	•	ocurad ala	im:			
	_	he debtors and anothe						
	Check if this c	laim is for a commun	Taxes and certain of	ther debts y	ou owe the	government		
	Is the claim subject		Claims for death or p	personal inj	ury while yo	u were intoxicated		
	■ No		☐ Other. Specify					
	☐ Yes		20			taxes owed by D Country Cuisine		

or 1 Joseph D. Giles or 2 Poppy M. Giles		Case nu	mber (if known)	20-10747-j7	
N.M. Taxation and Revenue Department	Last 4 digits of account number	1000	\$27,518.42	\$27,518.42	\$0.0
Priority Creditor's Name Attn: Bankruptcy Section P.O. Box 8575	When was the debt incurred?	2019		-	
Albuquerque, NM 87198 Number Street City State Zip Code	As of the date you file, the claim	ie: Chock all	that apply		
Who incurred the debt? Check one.	Contingent	is. Officer all	шаг арріу		
☐ Debtor 1 only	_				
Debtor 2 only	☐ Unliquidated				
_	Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
Is the claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
■ No	Other. Specify				
Yes			taxes owed by High Country		
Rio Arriba County Assessor	Last 4 digits of account number	8731	\$239.27	\$0.00	\$239.2
Priority Creditor's Name 1122 Industrial Park Road	When was the debt incurred?	2017		_	
Espanola, NM 87532 Number Street City State Zip Code	As of the date you file, the claim	io. Chaak all	that annly		
Who incurred the debt? Check one.		is. Check all	шаг арріу		
□ Debtor 1 only	☐ Contingent				
	Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
\square At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
■ No	☐ Other. Specify				
Yes	2017 prope	erty taxes			
Rio Arriba County Assessor	Last 4 digits of account number	8731	\$3,610.75	\$0.00	\$3,610.7
		2018			
Priority Creditor's Name 1122 Industrial Park Road Espanola, NM 87532	When was the debt incurred?	2010		-	
	When was the debt incurred? As of the date you file, the claim		that apply	-	
1122 Industrial Park Road Espanola, NM 87532			that apply	-	
1122 Industrial Park Road Espanola, NM 87532 Number Street City State Zip Code	As of the date you file, the claim		that apply	-	

■ No

☐ Yes

■ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

 \square At least one of the debtors and another

■ Check if this claim is for a community debt

Schedule E/F: Creditors Who Have Unsecured Claims

Type of PRIORITY unsecured claim:

■ Taxes and certain other debts you owe the government

 $\hfill\square$ Claims for death or personal injury while you were intoxicated

2018 property taxes

☐ Domestic support obligations

 \square Other. Specify

tor 2 Poppy M. Giles		Case number (if known)	20-10747-j7	•
Rio Arriba County Assessor	Last 4 digits of account number	8731 \$2,937.0	60 \$2,937	7.00
Priority Creditor's Name 1122 Industrial Park Road	When was the debt incurred?	2019		
Espanola, NM 87532 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
☐ Debtor 1 only	☐ Unliquidated			
☐ Debtor 2 only	☐ Disputed			
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:		
☐ At least one of the debtors and another	☐ Domestic support obligations			
_	_			
Check if this claim is for a community debt	■ Taxes and certain other debts y□ Claims for death or personal inj	· ·		
Is the claim subject to offset?	☐ Other. Specify	ary writte you were intoxicated		
■ No □ Yes	2019 prope	arty tayes		
No. You have nothing to report in this part. Submit Yes.	this form to the court with your other s	who holds each claim. If a cre		
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when	who holds each claim. If a create type of claim it is. Do not lis	claims already inclu	uded in Part 1. If m Continuation Page
Oo any creditors have nonpriority unsecured claim No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other Part 2.	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify what creditors in Part 3.If you have more to	who holds each claim. If a creat type of claim it is. Do not listen three nonpriority unsecure	claims already inclu	uded in Part 1. If m Continuation Page
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other eart 2. Jose P. Abeyta, Jr.	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when	who holds each claim. If a creat type of claim it is. Do not listen three nonpriority unsecure	claims already inclu	uded in Part 1. If m Continuation Page
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No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nescured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other lart 2. Jose P. Abeyta, Jr. Nonpriority Creditor's Name 170-B Lower San Pedro Road Espanola, NM 87532 Number Street City State Zip Code	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify when creditors in Part 3.If you have more to be a count numb. Last 4 digits of account numb. When was the debt incurred? As of the date you file, the claim.	who holds each claim. If a creat type of claim it is. Do not list nan three nonpriority unsecure	claims already inclu	uded in Part 1. If m Continuation Page
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Jose P. Abeyta, Jr. Nonpriority Creditor's Name 170-B Lower San Pedro Road Espanola, NM 87532 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify where creditors in Part 3.If you have more to the Last 4 digits of account number When was the debt incurred? As of the date you file, the cla	who holds each claim. If a creat type of claim it is. Do not list nan three nonpriority unsecure	claims already inclu	uded in Part 1. If m Continuation Page
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No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the needured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Jose P. Abeyta, Jr. Nonpriority Creditor's Name 170-B Lower San Pedro Road Espanola, NM 87532 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	this form to the court with your other set alphabetical order of the creditor laim. For each claim listed, identify where creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a count number of the creditors in Part 3.If you have more to be a creditors in Part 3.If you have more to be a creditors in Part 3.If you have more to be a creditors in Part 4.If you have more to be a creditors in Part 4.If you have more to be a creditors in Part 4.If you have more to be a creditors in Part 4.If you have more to be a creditor of the creditors in Part 4.If you have more to be a creditors in Part 4.If	who holds each claim. If a creative of claim it is. Do not list that three nonpriority unsecure April, 2020 im is: Check all that apply	claims already inclu	uded in Part 1. If m Continuation Page
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No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the neecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. Jose P. Abeyta, Jr. Nonpriority Creditor's Name 170-B Lower San Pedro Road Espanola, NM 87532 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify where creditors in Part 3.If you have more to a count numb. Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla. Contingent Unliquidated Disputed Type of NONPRIORITY unsections.	who holds each claim. If a creat type of claim it is. Do not list nan three nonpriority unsecure April, 2020 im is: Check all that apply ured claim:	t claims already included claims fill out the Control of the Contr	uded in Part 1. If m Continuation Page
No. You have nothing to report in this part. Submit Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other cart 2. Jose P. Abeyta, Jr. Nonpriority Creditor's Name 170-B Lower San Pedro Road Espanola, NM 87532 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other states alphabetical order of the creditor laim. For each claim listed, identify where creditors in Part 3.If you have more to credit a count number of the digits of account number of the digits of ac	who holds each claim. If a creat type of claim it is. Do not list nan three nonpriority unsecure April, 2020 im is: Check all that apply ured claim:	e that you did not	uded in Part 1. If m Continuation Page

Debtor Debtor	1 Joseph D. Giles 2 Poppy M. Giles		Case number (if known) 20-10747-j7	,
4.2	Admiral Beverage Corp.	Last 4 digits of account number	0144	\$566.45
	Nonpriority Creditor's Name 7 Paseo de River Street Santa Fe, NM 87507	When was the debt incurred?	October, 2019	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	•		
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	_	Student loans	u ciaiiii.	
	Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	_ 10	· · ·	of liquor of Debtors' former	
	☐ Yes		G4 High Country Cuisine, LLC	
4.3	Alsco	Last 4 digits of account number	1570	\$2,233.28
	Nonpriority Creditor's Name P.O. Box 1288	When was the debt incurred?	July, 2019 - October, 2019	
	Farmington, NM 87499	- As of the data way file the alains	: O	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Cneck all that apply	
	Debtor 1 only	_		
	Debtor 2 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		Laundry se	ervices for Debtors' former	
	Yes		34 High Country Cuisine, LLC	
4.4	Alsco	Last 4 digits of account number	1570	\$298.85
	Nonpriority Creditor's Name P.O. Box 1288	When was the debt incurred?	July, 2019 - August, 2019	
	Farmington, NM 87499 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.5 or the date you me, the slam	one on that apply	
	☐ Debtor 1 only			
	Debtor 2 only	Contingent		
	Debtor 1 and Debtor 2 only	Unliquidated		
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

Laundry services for Debtors' former

■ Other. Specify business, Latitute 37 Ventures, LLC

Debtor Debtor	1 Joseph D. Giles 2 Poppy M. Giles		Case number (if known) 20-10	747-j7
4.5	Bank of America	Last 4 digits of account number	1853	\$12,268.51
	Nonpriority Creditor's Name P.O. Box 982235 El Paso, TX 79998	When was the debt incurred?	Revolving	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you o	lid not
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Revolving	credit card	
4.6	Black Hills Energy Nonpriority Creditor's Name	Last 4 digits of account number	5269	\$1,132.34
	P.O. Box 6006 Rapid City, SD 57709	When was the debt incurred?	June, 2019 - July, 2019	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you d	lid not
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Latitude 37	es for Debtors' former busin Ventures, LLC.	ess,
4.7	Chris Blas Nonpriority Creditor's Name	Last 4 digits of account number		\$66,000.00
	CBS Investments, LLC P.O. Box 5906	When was the debt incurred?	July, 2019	
	Pagosa Springs, CO 81147	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you o	lid not
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Rent owed to landlord of Debtors' former

■ Other. Specify **business, Latitude 37 Ventures, LLC**

Debtor Debtor	1 Joseph D. Giles2 Poppy M. Giles		Case number (if known) 20-10)747-j7
4.8	Capital One	Last 4 digits of account number	2370	\$941.15
	Nonpriority Creditor's Name P.O. Box 30285	When was the debt incurred?	Revolving	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you o	did not
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Revolving	• •	
4.9	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6379	\$16,949.25
	P.O. Box 60599 City of Industry, CA 91716 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Revolving is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you o	did not
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Revolving	credit card	
4.1	Care Credit	Last 4 digits of account number	1809	\$755.34
	Nonpriority Creditor's Name Synchrony Bank P.O. Box 960061	When was the debt incurred?	Revolving	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans		diel nes
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	aration agreement or divorce that you o	aid fiot
	□ NO □ Yes	Other Specify Revolving		

Poppy M. Giles		Case number (if known) 20-10747-j7	
Chase	Last 4 digits of account number	7047	\$3,772
Nonpriority Creditor's Name	-		
P.O. Box 15298	When was the debt incurred?	Revolving	
Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	,		
Debtor 1 only	Пол		
Debtor 2 only	Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
_	☐ Disputed	Colors of the Color of the Colo	
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	a plane, and other similar debts	
	•		
Yes	Other. Specify Revolving c	eredit card	
Chase	Last 4 digits of account number	4010	\$3.129
Nonpriority Creditor's Name			40,120
P.O. Box 6294	When was the debt incurred?	Revolving	
Carol Stream, IL 60197			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only			
_ ′	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
■ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	•	
Yes	Other. Specify Revolving c	redit card	
Chef Link	Last 4 digits of account number		\$1,368
Nonpriority Creditor's Name			
1306 Osage Avenue Santa Fe, NM 87505	When was the debt incurred?	July, 2018 - September, 2018	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
■ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and. agreement or diverse that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Equipment repair services for Debtors' former business, G4 High Country Cuisine,

■ Other. Specify LLC

Joseph D. Giles Poppy M. Giles		Case number (if known) 20-10747-j7	
Christus St. Vincent Hospital	Last 4 digits of account number	7612	\$1,46
Nonpriority Creditor's Name P.O. Box 842211 Dallas, TX 75284	When was the debt incurred?	February, 2020	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	O continuent		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	Student loans	u ciaiii.	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	tration agreement of divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical se	rvices	
Citi Cards	Last 4 digits of account number	7342	\$8,15
Nonpriority Creditor's Name P.O. Box 6500 Sioux Falls, SD 57117	When was the debt incurred?	Revolving	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	<u> </u>	
■ No	Debts to pension or profit-sharing		
Yes	Other. Specify Revolving	credit card	
Direct TV	Last 4 digits of account number	9610	\$22
Nonpriority Creditor's Name			
P.O. Box 410347	When was the debt incurred?	August, 2019	
Charlotte, NC 28241 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.		,	
☐ Debtor 1 only			

☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community debt $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Satellite television services for Debtors' former business, G4 High Country Cuisine, ☐ Yes ■ Other. Specify LLC

Debtor Debtor	Joseph D. Giles Poppy M. Giles		Case number (if known) 20-10747-jū	7
4.1 7	Ferrellgas	Last 4 digits of account numbe	_{or} 3905	\$378.22
	Nonpriority Creditor's Name P.O. Box 1003	When was the debt incurred?	August, 2019	-
	Liberty, MO 64069 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
	 □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another 	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecui	red claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
	■ No □ Yes	_ Purchase	ring plans, and other similar debts e of propane for Debtors' former , G4 High Country Cuisine, LLC	
4.1	Ferrellgas	Last 4 digits of account numbe	er <u>8535</u>	\$25.02
-	Nonpriority Creditor's Name P.O. Box 1003 Liberty, MO 64069 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the clair	February, 2019 n is: Check all that apply	
	Who incurred the debt? Check one. □ Debtor 1 only	☐ Contingent	The Cross of the Copp.	
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecur	red claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a se report as priority claims	eparation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts	
	☐ Yes	Other. Specify Purchase	or propane	-
4.1 9	First Insurance Funding Nonpriority Creditor's Name	Last 4 digits of account numbe	5984 <u>5984</u>	\$6,089.72
	450 Skokie Blvd. Suite 1000 Northbrook, IL 60062	When was the debt incurred?	November, 2019	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clair	n is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	■ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecu	red claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not	
	■ No	<u></u>	ring plans, and other similar debts	
	☐ Yes	_ owed by	liability insurance premiums Debtors' former business, G4 High Cuisine, LLC	

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Joseph D. Giles 20-10747-j7 Debtor 2 Poppy M. Giles Case number (if known)

4.2 0	Joe and Sharon Giles	Last 4 digits of account number	\$168,795.90
·	Nonpriority Creditor's Name 107 W. Blevins Road Artesia, NM 88210	When was the debt incurred? July, 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Signature loan for \$179,000.00 obtained for Debtors' former business, G4 High Country Cuisine, LLC, in July, 2018.	
1.2	Headway Capital	Last 4 digits of account number 8643	\$17,290.57
	Nonpriority Creditor's Name 175 W. Jackson Blvd. Suite 1000	When was the debt incurred? May, 2019	
	Chicago, IL 60604 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
	Debtor 2 only	☐ Contingent	
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Business revolving line of credit for \$20,000.00 obtained for Debtors' former business, G4 High Country Cuisine, LLC, in May, 2019.	
1.2	Healthfront	Last 4 digits of account number 5846	\$75.29
	Nonpriority Creditor's Name P.O. Box 88087 Chicago, IL 60680	When was the debt incurred? February, 2000	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical services	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Joseph D. Giles
Debtor 2 Poppy M. Giles Case number (if known)

4.2	Itria Ventures. LLC (Biz 2 Credit)	Last 4 digits of account number		\$18,484.17
	Nonpriority Creditor's Name 1 Penn Plaza 45th Floor	When was the debt incurred?	November, 2018	
	New York, NY 10119 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari		
	□Yes	_ Debtors' fo	loan for \$48,000.00 obtained for or o	
4.2	Chetan Johnston	Last 4 digits of account number		\$47,144.00
	Nonpriority Creditor's Name High Country Restaurant, LLC 2211 Highway 17	When was the debt incurred?	July, 2016	
	Chama, NM 87520 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	ed claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sep	aration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-shari	ng plans, and other similar debts	
	□ Yes	Business Debtors' fo	loan for \$80,000.00 obtained for or o	

20-10747-j7

Debto	or 1 Joseph D. Giles Poppy M. Giles		Case number (if known) 20-10747-j7	
4.2 5	Kabbage, Inc.	Last 4 digits of account number	7958	\$2,476.21
	Nonpriority Creditor's Name 730 Peachtree Strret, NE Suite 1100	When was the debt incurred?	May, 2019	
	Atlanta, GA 30308 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	_	\$11,000.00 business. (business line of credit for obtained for Debtors' former 34 High Country Cuisine, LLC, in	
	Yes	■ Other. Specify May, 2019.		
4.2 6	La Clinica del Pueblo de Rio Arriba	Last 4 digits of account number	0943	\$487.19
	Nonpriority Creditor's Name P.O. Box 250 Tierra Amarilla, NM 87575	When was the debt incurred?	June, 2019	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plane, and other similar debte	
	■ No □ Yes	· ·		
	☐ Yes	Other. Specify Dental serv	rices	
4.2 7	La Clinica del Pueblo de Rio Arriba	Last 4 digits of account number	3179	\$81.60
	Nonpriority Creditor's Name P.O. Box 250 Tierra Amarilla, NM 87575	When was the debt incurred?	December, 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ vac	Other County. Dental serv	vices	

	Case number (if known) 20-10/47-J/	
Last 4 digits of account number	6401	\$2,22
- When we the debt in some 10		
when was the debt incurred?	July, 2019	
As of the date you file, the claim i	s: Check all that apply	
Contingent		
'		
•	d claim:	
	d Claim.	
	iration agreement or divorce that you did not	
<u></u>	g plans, and other similar debts	
■ Other. Specify business, L	services for Debtors' former atitute 37 Ventures, LLC	
Last 4 digits of account number	9611	\$73
When was the debt incurred?	August, 2018	
As of the date you file, the claim i	s: Check all that apply	
☐ Contingent		
☐ Unliquidated		
Disputed		
ar area		
Type of NONPRIORITY unsecured	d claim:	
Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
Student loans	aration agreement or divorce that you did not	
Student loans		
☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not g plans, and other similar debts	
☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not g plans, and other similar debts	
☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not g plans, and other similar debts	\$230
☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify Medical set	ration agreement or divorce that you did not g plans, and other similar debts rvices	\$236
☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify Medical set	ration agreement or divorce that you did not g plans, and other similar debts	\$236
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharing Cother. Specify Electricity states business, L Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Electricity services for Debtors' former business, Latitute 37 Ventures, LLC Last 4 digits of account number When was the debt incurred? August, 2018 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed

☐ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims debt Is the claim subject to offset? $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical services ☐ Yes

tor 1 Joseph D. Giles Poppy M. Giles		Case number (if known) 20-10747-j7	
Markel	Last 4 digits of account number	2567	\$567.00
Nonpriority Creditor's Name P.O. Box 650028	When was the debt incurred?	February, 2019	
Dallas, TX 75265 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent		
<u> </u>	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	claim:	
■ Check if this claim is for a communi	ty Student loans		
debt Is the claim subject to offset?	_	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
— 140	, ,	npensation premiums for	
☐ Yes		mer business. G4 High Country	
Manuel Martinez	Last 4 digits of account number		\$3,103.00
Nonpriority Creditor's Name P.O. Box 89	When was the debt incurred?	December, 2016	
Los Ojos, NM 87551			
Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
■ Check if this claim is for a communi	ty Student loans		
debt Is the claim subject to offset?	•	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Money owed	d for lease of billboard for mer business, G4 High Country	
Yes	Other. Specify Cuisine, LLC		
New Mexico Gas Company	Last 4 digits of account number	2496	\$263.94
Nonpriority Creditor's Name P.O. Box 27885 Albuquerque, NM 87125	When was the debt incurred?	October, 2019 - January, 2020	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
Debtor 1 only	Пол		
☐ Debtor 2 only	☐ Contingent		
Debtor 1 and Debtor 2 only	Unliquidated		
_	Disputed		
At least one of the debtors and another		ciaim:	
Check if this claim is for a communi	=		
debt Is the claim subject to offset?	Obligations arising out of a separareport as priority claims	ation agreement or divorce that you did not	

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Gas services for Debtors' former business, G4 High Country Cuisine, LLC

Joseph D. Giles Poppy M. Giles		Case number (if known) 20-10747-j7	
North Central Solid Waste Authority	Last 4 digits of account number	4557	\$3,115.
Nonpriority Creditor's Name			
P.O. Box 1230 Espanola, NM 87532	When was the debt incurred?	September, 2019 - December, 2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	■ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	tration agreement of divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes		vices for Debtors' former G4 High Country Cuisine, LLC	
Cooperative Nonpriority Creditor's Name P.O. Box 217 Chama, NM 87520	Last 4 digits of account number When was the debt incurred?	December, 2019	. ,
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing		
Yes	■ Other. Specify business,	services for Debtors' former G4 High Country Cuisine, LLC	
Orkin	Last 4 digits of account number	0091	\$113.
Nonpriority Creditor's Name	When we the debt in	May 2010	
Nonpriority Creditor's Name P.O. Box 7161	When was the debt incurred?	May, 2019	
Nonpriority Creditor's Name	When was the debt incurred? As of the date you file, the claim		
Nonpriority Creditor's Name P.O. Box 7161 Pasadena, CA 91109			

Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No **Exterminator services for Debtors' former** ☐ Yes ■ Other. Specify business, G4 High Country Cuisine, LLC

Debto Debto	•		Case number (if known)	20-10747-j7	
4.3	Pagosa Area Water and Sanitation	Last 4 digits of account number	8240		\$1,984.41
	Nonpriority Creditor's Name 100 Lyn Avenue Pagosa Springs, CO 81147	When was the debt incurred?	June, 2019 - July, 2	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Water services for Debtors' former

 \square Debts to pension or profit-sharing plans, and other similar debts

Other. Specify business, Latitude 37 Ventures, LLC

☐ Student loans

report as priority claims

■ Check if this claim is for a community

Is the claim subject to offset?

■ No

☐ Yes

4.3

4.3

9

Pocket Pros	Last 4 digits of acc	count number	
Nonpriority Creditor's Name P.O. Box 1788 Nampa, ID 83653	When was the deb	t incurred?	October, 2016 - March, 2018
Number Street City State Zip Code	As of the date you	file, the claim	is: Check all that apply
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIOR	RITY unsecure	d claim:
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising report as priority cla		aration agreement or divorce that you did not
■ No	Debts to pension	n or profit-sharir	ng plans, and other similar debts
□ Yes	_		g pledge owed by Debtors' siness, G4 High Country Cuisine,

Premier Distributing 0258 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 25806 When was the debt incurred? June, 2019 - September, 2019 Albuquerque, NM 87125 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ■ Check if this claim is for a community ☐ Student loans debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Purchase of liquor for Debtors' former ☐ Yes ■ Other. Specify business, G4 High Country Cuisine, LLC

\$828.00

\$1,042.31

Poppy M. Giles	Case number (if known) 20-10747-j7	
Presbyterian Healthcare Services	Last 4 digits of account number 0775	\$554.0
Nonpriority Creditor's Name P.O. Box 27822 Albuquerque, NM 87125	When was the debt incurred? December, 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
Check if this claim is for a community debt		
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical services	
Quest Diagnostics	Last 4 digits of account number 9944	\$30.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ00.0
P.O. Box 740779 Cincinnati, OH 45274	When was the debt incurred? September, 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Medical services	
Champack Foods Communic	9404	CAD A
Shamrock Foods Company Nonpriority Creditor's Name	Last 4 digits of account number 8191	\$9,610.4
2540 N. 29th Avenue Phoenix, AZ 85009	When was the debt incurred? June, 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	·	
-	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and anotherCheck if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	

debt

■ No

☐ Yes

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not

Purchase of food products for Debtors' former business, G4 High Country Cuisine,

 \square Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

report as priority claims

■ Other. Specify LLC

1 Joseph D. Giles 2 Poppy M. Giles		Case number (if known) 20-10747-j7	
Shamrock Foods Company	Last 4 digits of account number	6790	\$18,699
Nonpriority Creditor's Name 2540 N. 29th Avenue Phoenix, AZ 85009	When was the debt incurred?	June, 2019 - July, 2019	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Purchase of former bus	of food products for Debtors' iness, Latitude 37 Ventures, LLC	
Sysco	Last 4 digits of account number	5536	\$1,667
Nonpriority Creditor's Name	_		
601 Camanche Road, NE Albuquerque, NM 87107	When was the debt incurred?	November, 2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.		,	
☐ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
_	Student loans	a Glaini.	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	tration agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Purchase of	of food products for Debtors'	
☐ Yes	Other. Specify former bus	iness, G4 High Country Cuisine,	
Tamara Singleton, M.D.	Last 4 digits of account number	2400	\$30
Nonpriority Creditor's Name	_		
P.O. Box 805	When was the debt incurred?	April, 2019	
EI Rito, NM 87530 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	. to or the date you me, the claim	Onook an mat appry	

Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ■ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical services ☐ Yes

Poppy M. Giles	Case number (if known) 20-10747-j7	
U.S. Foods	Last 4 digits of account number 2265	\$1,19
Nonpriority Creditor's Name 3700 Prince Street, SE	When was the debt incurred? June, 2019	
Albuquerque, NM 87105 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Purchase of food products for Debtors' former business, Latitude 37 Ventures, LLC	
U.S. Foods	Last 4 digits of account number 5701	\$9,967
Nonpriority Creditor's Name 3700 Prince Street, SE Albuquerque, NM 87105	When was the debt incurred? September, 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Purchase of food products for Debtors'	
Yes	■ Other. Specify former business, G4 High Country Cuisine, LLC	
Wells Fargo Bank	Last 4 digits of account number 5674	\$440
Nonpriority Creditor's Name P.O. Box 6995 Portland, OR 97228	When was the debt incurred? July, 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	

■ No

☐ Yes

■ Other. Specify Ventures, LLC

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Overdrawn business checking account of Debtor's former business, Latitude 37

Is the claim subject to offset?

report as priority claims

Debt Debt	or 1 Joseph D. Giles or 2 Poppy M. Giles		Case number (if known)	20-10747-j7		
4.4	Windstream	Last 4 digits of account number	9569	4	\$1,186.00	
<u> </u>	Nonpriority Creditor's Name P.O. Box 9001908 Louisville, KY 40290	When was the debt incurred?	November, 2019			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only					
		☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar de	ebts		
	☐ Yes	■ Other. Specify Telephone services for Debtors' former business, G4 High Country Cuisine, LLC				
4.5 0	Worldpay	Last 4 digits of account number	2543	\$1	13,277.00	
	Nonpriority Creditor's Name 4610 S. Ulster Street	When was the debt incurred?	2018			
	Denver, CO 80237 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	Пол				
	Debtor 2 only	☐ Contingent				
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated				
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	_	Student loans	u ciaiii.			
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce	that you did not		
	Is the claim subject to offset?	report as priority claims		-1-4-		
	No	Debts to pension or profit-sharing				
	☐ Yes		I processing fees for siness, G4 High Coun			
Part	3: List Others to Be Notified About a De	aht That You Already Listed				
. Use is to hav not	this page only if you have others to be notified rying to collect from you for a debt you owe to s re more than one creditor for any of the debts th ified for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that someone else, list the original creditor in at you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the itional creditors here. If yo	collection agency here. Simila	ırly, if you	
	and Address Adjustments Ltd	On which entry in Part 1 or Part 2 did you Line 4.46 of (<i>Check one</i>):	_	it. Haranana de Clairea		
A.G. Adjustments, Ltd 740 Walt Whitman Road		`	Part 1: Creditors with Prior Part 2: Creditors with Nong	•		
Melv	ville, NY 11747	Last 4 digits of account number	Part 2: Creditors with Nonp	oriority Unsecured Claims		
Name	e and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?			
	. Adjustments, Ltd	Line <u>4.47</u> of (<i>Check one</i>):	Part 1: Creditors with Prior	ity Unsecured Claims		
	Walt Whitman Road		Part 2: Creditors with Nonp	priority Unsecured Claims		
weiv	ville, NY 11747	Last 4 digits of account number				
Name	e and Address	On which entry in Part 1 or Part 2 did you	I list the original creditor?			
ARS	S National Services, Inc.		Part 1: Creditors with Prior	ity Unsecured Claims		
	. Box 469046		Part 2: Creditors with Nonp	oriority Unsecured Claims		
⊏SC	ondido, CA 92046	Last 4 digits of account number	·			
Name	e and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?			

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

Debtor 1 Joseph D. Giles Debtor 2 Poppy M. Giles		Case number (if known)	20-10747-j7		
Credit Solutions of Kentucky 2277 Thunderstick Drive Suite 400 Lexington, KY 40505	Line 4.49 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address Mark Kirkorsky, Esq. 1119 W. Southern Avenue Suite 200 Mesa, AZ 85210	On which entry in Part 1 or Part 2 Line 4.23 of (<i>Check one</i>): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address MRS BPO, LLC 1930 Olney Avenue Cherry Hill, NJ 08003	On which entry in Part 1 or Part 2 Line 4.11 of (<i>Check one</i>): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Rauch-Milliken International, Inc. P.O. Box 8390 Metairie, LA 70011	On which entry in Part 1 or Part 2 Line 4.19 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Mark Rhodes, Esq. 1801 Lomas Blvd., NW Albuquerque, NM 87104	On which entry in Part 1 or Part 2 Line 4.24 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Synchrony Bank P.O. Box 965064 Orlando, FL 32896	On which entry in Part 1 or Part 2 Line 4.10 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Part 2: Creditors with Nonpri			
Name and Address Robert S. Wolkin, Esq. 3301 E. Camino Campestre Tucson, AZ 85716	On which entry in Part 1 or Part 2 Line 4.42 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Robert S. Wolkin, Esq. 3301 E. Camino Campestre Tucson, AZ 85716	On which entry in Part 1 or Part 2 Line 4.43 of (Check one): Last 4 digits of account number	lid you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims			
Part 4: Add the Amounts for Each Typ 6. Total the amounts of certain types of unsecutype of unsecured claim. 6a. Domestic support obl	ne of Unsecured Claim ured claims. This information is for stati	istical reporting purposes only. 28 Total C	•		
Total					

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	าร	Taxes and certain other debts you owe the government	6b.	\$ 47,290.47
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 47,290.47
				Total Claim
T	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 Joseph D. Giles 20-10747-j7 Debtor 2 Poppy M. Giles Case number (if known) you did not report as priority claims 0.00 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 454,629.98 Total Nonpriority. Add lines 6f through 6i. 6j. 454,629.98

Fill in this infor	mation to identify your	case:		
Debtor 1	Joseph D. Giles			
	First Name	Middle Name	Last Name	
Debtor 2	Poppy M. Giles			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXIC	0	
Case number	20-10747-j7			
(if known)				Check if this is ar amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Chama Valley Independent Schools P.O. Drawer 10 Chama, NM 87575	Debtor Joseph Giles is a party to a landlord-tenant lease with Chama Valley Independent Schools for a mobile home that he rents from Chama Valley Independent Schools. Joseph Giles is the tenan-lessee of this lease and Chama Valley Independent Schools is the landlord-lessor of this lease.
2.2	Chris Blas CBS Investments, LLC P.O. Box 5906 Pagosa Springs, CO 81147	Debtor Poppy Michelle Giles is a party to a landlord-tenant lease with Chris Blas for a commerical building that she rented from Chris Blas for her former business, Latitude 37 Ventures, LLC. Poppy Michelle Giles is the tenant-lessee of this lease and Chris Blas is the landlord-lessor of this lease.
2.3	Jose Abeyta, Jr. 170-B Lower San Pedro Road Espanola, NM 87532	Debtor Poppy Michelle Giles is a party to a landlord-tenant lease with Jose Abeyta, Jr. for a house that she rents from Mr. Abeyta. Poppy Michelle Giles is the tenant-lessee of this lease and Jose Abeyta, Jr. is the landlord-lessor of this lease.

Fill in this	information to identify your	case:		
Debtor 1	Joseph D. Giles			
Debtor 2	First Name Poppy M. Giles	Middle Name	Last Name	
Spouse if, fili		Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW ME	XICO	
Cooo num	hor 20 40747 i7			
Case num (if known)	ber 20-10747-j7			☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Cod	obtore		42/45
JULIEU	idle II. Todi Cod	EDIOI 3		12/15
ill it out, a our name		boxes on the left. Attach . Answer every question	the Additional Page to a	n. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write s a codebtor.
□ No				
■ Yes	3			
2 With	hin the last 8 years have you	lived in a community or	operty state or territory?	? (Community property states and territories include
	na, California, Idaho, Louisiana,			
Пио	. Go to line 3.			
_	s. Did your spouse, former spor	use or legal equivalent live	with you at the time?	
	s. Dia your opouco, former opor	200, or logal oquivalent live	war you at the time.	
	□ No			
	Yes.			
	In which community state Poppy Michelle Giles 105 State Road 514 Los Ojos, NM 87551	e or territory did you live? S	New Mexico	Fill in the name and current address of that person. Debtor Joseph Giles' estranged wife
	Name of your spouse, former sp Number, Street, City, State & Zip			
in line Form	lumn 1, list all of your codebt e 2 again as a codebtor only i	ors. Do not include your f that person is a guaran	tor or cosigner. Make su	your spouse is filing with you. List the person shown ire you have listed the creditor on Schedule D (Officials). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	G4 High Country Cuisine,			■ Schedule D, line 2.1
	- defunct limited liability o - Debtors' former busines			☐ Schedule E/F, line ☐ Schedule G BBVA USA
	G4 High Country Cuisine, - defunct	LLC		■ Schedule D, line2.3
•	- defulict			☐ Schedule E/F, line ☐ Schedule G Northern Leasing Systems, Inc.

Official Form 106H Schedule H: Your Codebtors Page 1 of 6 Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com Case 20-10747-j7 Doc 12 Filed 05/02/20 Entered 05/02/20 08:37:41 Page 39 of 62 Schedule H: Your Codebtors

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.3	G4 High Country Cuisine, LLC	☐ Schedule D, line
	- defunct	Schedule E/F, line2.1
		☐ Schedule G
		N.M. Taxation and Revenue Department
3.4	G4 High Country Cuisine, LLC - defunct	☐ Schedule D, line
	- defunct	Schedule E/F, line 2.2
		☐ Schedule G N.M. Taxation and Revenue Department
		N.M. Taxation and Revenue Department
3.5	G4 High Country Cuisine, LLC	Contradute D. Bara
3.5	- defunct	Schedule D, line
		Schedule E/F, line 4.3
		☐ Schedule G Alsco
3.6	G4 High Country Cuisine, LLC	☐ Schedule D, line
	- defunct	■ Schedule E/F, line4.13
		☐ Schedule G
		Chef Link
0.7	CA High Country Crisins 11 C	
3.7	G4 High Country Cuisine, LLC - defunct	☐ Schedule D, line
		■ Schedule E/F, line <u>4.24</u> □ Schedule G
		Chetan ~Johnston
3.8	G4 High Country Cuisine, LLC	☐ Schedule D, line
	- defunct	■ Schedule E/F, line <u>4.16</u>
		☐ Schedule G
		Direct TV
2.0	C4 High Country Cuicing 11 C	Cohadula D. list-
3.9	G4 High Country Cuisine, LLC - defunct	☐ Schedule D, line
		■ Schedule E/F, line <u>4.17</u> □ Schedule G
		Ferrellgas
3.10	G4 High Country Cuisine, LLC	☐ Schedule D, line
	- defunct	Schedule E/F, line4.19
		☐ Schedule G
		First Insurance Funding

Additional Page to List More Codebtors Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Check all schedules that apply: 3.11 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.20 ☐ Schedule G Joe and Sharon ~Giles 3.12 G4 High Country Cuisine, LLC ☐ Schedule D, line ___ - defunct ■ Schedule E/F, line 4.21 ☐ Schedule G **Headway Capital** 3.13 G4 High Country Cuisine, LLC ☐ Schedule D, line ___ - defunct ■ Schedule E/F, line 4.23 ☐ Schedule G Itria Ventures. LLC (Biz 2 Credit) 3.14 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.25 ☐ Schedule G Kabbage, Inc. 3.15 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.31 ☐ Schedule G _____ Markel 3.16 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.32 ☐ Schedule G Manuel ~Martinez 3.17 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.33 ☐ Schedule G **New Mexico Gas Company** 3.18 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.34 ☐ Schedule G **North Central Solid Waste Authority**

Additional Page to List More Codebtors Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.19 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.35 ☐ Schedule G Northern Rio Arriba Electric Cooperative 3.20 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.36 ☐ Schedule G _____ Orkin 3.21 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.39 ☐ Schedule G **Premier Distributing** 3.22 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.42 ☐ Schedule G **Shamrock Foods Company** 3.23 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.44 ☐ Schedule G _____ Sysco 3.24 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.47 ☐ Schedule G _____ U.S. Foods 3.25 G4 High Country Cuisine, LLC ☐ Schedule D, line ___ - defunct ■ Schedule E/F, line 4.49 ☐ Schedule G _____ Windstream 3.26 G4 High Country Cuisine, LLC ☐ Schedule D, line - defunct ■ Schedule E/F, line 4.38 ☐ Schedule G _____ **Pocket Pros**

	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.27	G4 High Country Cuisine, LLC	☐ Schedule D, line
	- defunct	■ Schedule E/F, line 4.50
		☐ Schedule G
		Worldpay
3.28	G4 High Country Cuisine, LLC - defunct	Schedule D, line
	- defunct	Schedule E/F, line 4.2
		☐ Schedule G
		Admirai Beverage Corp.
2 20	Latitude 37 Ventures, LLC	Cahadula D. lina
3.23	- defunct limited liability company	Schedule D, line
	-Debtors' former buisness	■ Schedule E/F, line <u>4.4</u> □ Schedule G
		Alsco
		7.1000
3.30	Latitude 37 Ventures, LLC	☐ Schedule D, line
	- defunct	Schedule E/F, line 4.7
		☐ Schedule G
		Chris ~Blas
3.31	Latitude 37 Ventures, LLC	☐ Schedule D, line
	- defunct	■ Schedule E/F, line 4.28
		☐ Schedule G
		La Plata Electric Association, Inc.
3.32	Latitude 37 Ventures, LLC	☐ Schedule D, line
	- defunct	■ Schedule E/F, line <u>4.43</u>
		☐ Schedule G
		Shamrock Foods Company
2 22	Latituda 27 Venturas LLC	Cohadala D. Erra
3.33	Latitude 37 Ventures, LLC - defunct	Schedule D, line
	doranot	Schedule E/F, line 4.46
		☐ Schedule G U.S. Foods
		0.0.10003
3.34	Latitude 37 Ventures, LLC	☐ Schedule D, line
5.0 1	- defunct	■ Schedule E/F, line 4.37
		☐ Schedule G
		Pagosa Area Water and Sanitation

Official Form 106H Schedule H: Your Codebtors Page 5 of 6 Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com Case 20-10747-j7 Doc 12 Filed 05/02/20 Entered 05/02/20 08:37:41 Page 43 of 62

Debtor 1 Joseph D. Giles
Poppy M. Giles

Co	olumn 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	atitude 37 Ventures, LLC defunct	☐ Schedule D, line ■ Schedule E/F, line4.6 ☐ Schedule G Black Hills Energy
	atitude 37 Ventures, LLC defunct	☐ Schedule D, line ■ Schedule E/F, line4.48 ☐ Schedule G Wells Fargo Bank

Fill in this information to	o identify your case:	
Debtor 1	Joseph D. Giles	
Debtor 2 (Spouse, if filing)	Poppy M. Giles	
United States Bankrup	tcy Court for the: DISTRICT OF NEW MEXICO	
Case number (If known)	10747-j7	Check if this is: An amended filing A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Athletic director/football coach Teacher Include part-time, seasonal, or Chama Valley Independent **Chama Valley Independent** self-employed work. **Employer's name Schools Schools** Occupation may include student or homemaker, if it applies. **Employer's address** P.O. Drawer 10 P.O. Drawer 10 Tierra Amarilla, NM 87575 Tierra Amarilla, NM 87575 How long employed there? 9 years 6 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 4,979.00 \$ 4,167.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Debtor 1 Debtor 2 Poppy M. Giles Case number (if known) 20-10747-j7

			F	or Debtor 1		For Debtor		
	Copy line 4 here	4.	\$	4,979.00	_		167.00	
5.	List all payroll deductions:							
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	499.00	9	6	711.00	
	5b. Mandatory contributions for retirement plans	5b.	\$	577.00		<u> </u>	488.00	
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	9		0.00	-
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	9	<u> </u>	0.00	-
	5e. Insurance	5e.	\$	1,321.00	9	<u> </u>	9.00	
	5f. Domestic support obligations	5f.	\$	0.00	5	5	0.00	
	5g. Union dues	5g.	\$	0.00	5	<u> </u>	0.00	
	5h. Other deductions. Specify:	_ 5h.+	\$	0.00	+ 3	<u> </u>	0.00	=
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,397.00	5	§ <u>1</u>	,208.00	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,582.00	9	2	,959.00	
8.	List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	ç	5	0.00	
	8b. Interest and dividends	8b.	\$	0.00			0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	Ş		0.00	-
	8d. Unemployment compensation	8d.	\$	0.00	9	<u> </u>	0.00	
	8e. Social Security	8e.	\$	0.00	9	<u> </u>	0.00	-
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	(<u> </u>	0.00	-
	8g. Pension or retirement income	8g.	\$	0.00	5	5	0.00	
	8h. Other monthly income. Specify:	8h.+	\$	0.00	+ 5	5	0.00	-
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	5	.	0.00	D
10	Calculate monthly income. Add line 7 + line 9.	10. \$		2,582.00 + \$		2,959.00	= \$	5,541.00
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		Σ,302.00		2,333.00		3,341.00
11.	State all other regular contributions to the expenses that you list in Schedule Include contributions from an unmarried partner, members of your household, your other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not a Specify:	depen				in <i>Schedul</i> e	e J. +\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The res Write that amount on the Summary of Schedules and Statistical Summary of Certain applies						\$	5,541.00
13.	Do you expect an increase or decrease within the year after you file this form	?						y income
	■ No. □ Yes. Explain:							
	Yes. Explain:							

Fill	in this inform	ation to identify yo	our case:					
	otor 1	Joseph D. G				Chec	ck if this is:	
							An amended filing	
	otor 2 ouse, if filing)	Poppy M. Gi	les				A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Ban	kruptcy Court for the	: DISTRI	CT OF NEW MEXICO		-	MM / DD / YYYY	
Cas	se number 2	20-10747-j7						
(If k	nown)	, , , , , , , , , , , , , , , , , , ,						
0	fficial F	orm 106J						
S	chedul	J: Your	 Exper	nses				12/15
Be info	as complete ormation. If	and accurate as	possible.	. If two married people a ich another sheet to this				
Par		cribe Your House	hold					
1.	Is this a jo							
	□ No. Go	to line 2. Des Debtor 2 live i	in a sonar	ate household?				
	- res. bc		iii a sepai	ate nousenoid:				
	_		st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	hold of Deb	tor 2.	
2.		ve dependents?	□ No	•	•			
۷.	•	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not stat	e the						■ No
	dependent	s names.			Son		13	☐ Yes
					Son		17	□ No ■ Yes
								□ No
								☐ Yes
								□ No
3.	Do your e	penses include	_					☐ Yes
0.	expenses	of people other to and your depende	han $_{oldsymbol{\square}}$	No Yes				
exp	timate your	a date after the l	our bankrı	ly Expenses uptcy filing date unless y is filed. If this is a sup				
the		ch assistance an		government assistance cluded it on Schedule I:			Your expe	enses
4.		or home owners		ses for your residence. or lot.	Include first mortgage	4. \$	}	200.00
	If not inclu	ıded in line 4:						
	4a. Real	estate taxes				4a. \$	3	0.00
		erty, homeowner's	s, or renter	's insurance		4a. \$		0.00
		e maintenance, re				4c. \$		0.00
_		eowner's associat			and a substitute to a second	4d. \$		0.00
5.	Additional	mortgage payme	ents for yo	our residence , such as h	ome equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses
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	otor 1	Joseph D. Giles			00 40747 '7
Deb	otor 2	Poppy M. Giles	Case num	ber (if known)	20-10747-j7
6.	Utiliti	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	250.00
	6b.	Water, sewer, garbage collection	6b.	\$	80.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	320.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	l and housekeeping supplies	7.	\$	600.00
8.	Child	dcare and children's education costs	8.	\$	0.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	100.00
10.	Perso	onal care products and services	10.	\$	100.00
11.	Medi	cal and dental expenses	11.	\$	500.00
12.		sportation. Include gas, maintenance, bus or train fare.	40	Φ.	300.00
		ot include car payments.	12.	·	
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
		itable contributions and religious donations	14.	\$	0.00
15.	Insur				
		ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	\$	0.00
		Health insurance	15a.	·	0.00
		Vehicle insurance	15b.		130.00
		Other insurance. Specify:	15d.	· -	0.00
16		s. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
10.	Spec		16.	\$	0.00
17.		Ilment or lease payments:		<u> </u>	0.00
		Car payments for Vehicle 1	17a.	\$	0.00
		Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as		· —	
	dedu	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00
	Spec	·	19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on Sche			
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
		Property, homeowner's, or renter's insurance	20c.		0.00
		Maintenance, repair, and upkeep expenses	20d.		0.00
		Homeowner's association or condominium dues	20e.		0.00
21.	Othe	r: Specify: Netflix	21.	+\$	17.00
22.	Calcı	ulate your monthly expenses			
		Add lines 4 through 21.		\$	2,697.00
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,523.00
		Add line 22a and 22b. The result is your monthly expenses.		\$	6,220.00
	220.7	Add line 22a and 22b. The result is your monthly expenses.		Ψ	6,220.00
23.		ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,541.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	6,220.00
	23c.	Subtract your monthly expenses from your monthly income.	00-	¢	-679.00
		The result is your <i>monthly net income</i> .	23c.	\$	-07 3.00
24	Do v	ou expect an increase or decrease in your expenses within the year after yo	u filo thia	form?	
∠4.		ou expect an increase or decrease in your expenses within the year after yo kample, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
		ication to the terms of your mortgage?			
	■ No	0.			
	□ Ye				

■ No.
□ Yes. Explain here:

Official Form 106J Schedule J: Your Expenses
Case 20-10747-j7 Doc 12 Filed 05/02/20 Entered 05/02/20 08:37:41 Page 48 of 62

	otor 1 Joseph D. Poppy M. 0				C.	ase numb	er (if known)	20-107	47-j7
Fill	in this information to	identify your	case:						
Deb	otor 1 Jose	ph D. Giles	6			Check in		2	
	otor 2 Popp ouse, if filing)	oy M. Giles				As	amended filing amende	nowing po	stpetition chapter 13 ng date:
Unit	ted States Bankruptcy C	ourt for the: _[DISTRIC	T OF NEW MEXICO		MN	M / DD / YYY	Y	
	se number nown)	0747-j7				_			
O.	fficial Form	106J-2							
				enses for Sepa					12/15
Del fort	btor 2 have one or n m only with respect	nore depend to expenses h another sh	lents in a for Del	ehold expenses ONLY I common, list the depend otor 2 that are not repor nis form. On the top of a	dents on both Sched ted on Schedule J. B	ule J and e as cor	d this form. nplete and a	Answer to	he questions on this s possible. If more
Par	t 1: Describe Yo	ur Househo	ld						
1.	Do you and Debto ☐ No. Do not Yes	r 1 maintain complete this		e households?					
2.	Do you have depe	ndents?] No						
	Do not list Debtor 1 list all other dependents of Deb regardless of wheth listed as a depende of Debtor 1 on Schedule J.	tor 2	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 2	ship to	Depende age	nt's	Does dependent live with you?
	Do not state the			·					□ No
	dependents names				Son		13		■ Yes
					Son		17		■ No □ Yes
									□ No □ Yes
	•								□ No □ Yes
3.	Do your expenses expenses of peop yourself and your	le other than		No Yes					I les
Par	t 2: Estimate Yo	ur Ongoing	Monthly	Fynansas					
Est		s as of your	bankru	ptcy filing date unless y	ou are using this for	n as a s	upplement in	a Chapte	r 13 case to report
				overnment assistance in Schedule I: Your Incon		.)	Your expens	es	
4.	The rental or hom payments and any			es for your residence. In lot.	nclude first mortgage	4.	\$		650.00
	If not included in I	ine 4:							
	4a. Real estate t 4b. Property, hor	axes neowner's, o	r renter's	s insurance		4a. 4b.	·		0.00
٠u: -	oial Form 106 I	•			I. Vour Evnances				

tor 1 Joseph D. Giles tor 2 Poppy M. Giles		Case numb	er (if known)	20-10747-j7
4c. Home maintenance	e, repair, and upkeep expenses	4c.	\$	0.00
	ciation or condominium dues	4d.		0.00
Additional mortgage pa	yments for your residence, such as home equity loans	5.	\$	0.00
Utilities: 6a. Electricity, heat, na	tural nas	6a.	\$	250.00
6b. Water, sewer, garb		6b.		0.00
_	one, Internet, satellite, and cable services	6c.		299.00
6d. Other. Specify:	one, internet, satellite, and cable services	6d.	*	
Food and housekeeping	v cumpling	ou.		0.00
Childcare and children'	• • •		\$ 	600.00
				0.00
Clothing, laundry, and o			\$	100.00
Personal care products			\$	100.00
Medical and dental exp		11.	—	300.00
	gas, maintenance, bus or train fare.	12.	\$	300.00
Do not include car payme	ents. ecreation, newspapers, magazines, and books	13.	·	100.00
	s and religious donations		\$ 	
Insurance.	and rengious donadons	14.	Ψ	0.00
	deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	addated from your pay or included in illies 4 or 20.	15a.	\$	0.00
15b. Health insurance		15b.		0.00
15c. Vehicle insurance		15c.	*	117.00
	pecify: Renters insurance	15d.	·	16.00
	kes deducted from your pay or included in lines 4 or 20.		—	10.00
Specify:		16.	\$	0.00
Installment or lease pay		47-	Φ.	
17a. Car payments for \		17a.		527.00
17b. Car payments for \	ehicle 2	17b.	·	0.00
17c. Other. Specify:	and the second s	17c.	\$	0.00
	ony, maintenance, and support that you did not report a or on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	ike to support others who do not live with you.	•	\$	0.00
Specify:	and the competition of the model of the second of the seco	19.	T	3.00
Other real property exp	enses not included in lines 4 or 5 of this form or on Sch	hedule I: Yo		
20a. Mortgages on othe	r property	20a.	\$	0.00
20b. Real estate taxes		20b.	·	0.00
20c. Property, homeowi	ner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repa	ir, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's asso	ciation or condominium dues	20e.	\$	0.00
Other: Specify: Pet for	ood	21.	+\$	25.00
Netflix			\$	17.00
Voodoo			\$	11.00
Sirius radio			\$	66.00
ESPN Plus			\$	18.00
Hulu			\$	13.00
Amazon Prime			\$	14.00
	ALLE SHELLOW		<u> </u>	
	. Add lines 5 through 21. expenses of Debtor 2. Copy the result to line 22b of Sched es for Debtor 1 and Debtor 2.	lule J to	\$	3,523.00
Line not used on this form Do you expect an increa	n. ase or decrease in your expenses within the year after y to finish paying for your car loan within the year or do you expect yo			ease or decrease because
■ NO				

Explain here: ☐ Yes.

					1
Fill in this infor	mation to identify your	case:			
Debtor 1	Joseph D. Giles				
	First Name	Middle Name	Las	st Name	
Debtor 2	Poppy M. Giles				
(Spouse if, filing)	First Name	Middle Name	Las	et Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW MEXICO			
Case number (if known)	20-10747-j7				☐ Check if this is an amended filing
Official Ford Declarate		ın Individual De	bt	or's Schedules	12/15
You must file the obtaining mone	is form whenever you fi	n connection with a bankruptcy	end	ed schedules. Making a false sta	tement, concealing property, or 100, or imprisonment for up to 20
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorney to	help	you fill out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
that they ar	alty of perjury, I declare re true and correct. seph D. Giles	that I have read the summary a		chedules filed with this declarated /s/ Poppy M. Giles	ion and
	h D. Giles			Poppy M. Giles	
Signatu	re of Debtor 1			Signature of Debtor 2	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date **April 10, 2020**

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Signature of Debtor 1

Date **April 10, 2020**

Best Case Bankruptcy

Fill in this information to identify your case:						
Debtor 1	Joseph D. Giles	Middle Name	LactName			
D 1 0		Middle Name	Last Name			
Debtor 2	Poppy M. Giles					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW MEXICO				
Case number	20-10747-j7					
(if known)				☐ Check if this is an		
				amended filing		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1	Mhat is your current marital status?	

- Married
- Not married
- During the last 3 years, have you lived anywhere other than where you live now?
 - ☐ No
 - Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:	or 1 Prior Address: Dates Debtor 1 Debto		Dates Debtor 2 lived there
71 State Road 514 Los Ojos, NM 87551	From-To: June, 2013 - June, 2018	■ Same as Debtor 1	■ Same as Debtor 1 From-To:
20 Llano Drive Chama, NM 87520	From-To: June, 2018 - July, 2019	Same as Debtor 1	Same as Debtor 1 From-To:
105 State Road 514 Los Ojos, NM 87551	From-To: August, 2019 - present (Poppy Giles)	■ Same as Debtor 1	■ Same as Debtor 1 From-To:
674 Pinon Drive Chama, NM 87520	From-To: August, 2019 - present (Joseph Giles)	■ Same as Debtor 1	■ Same as Debtor 1 From-To:

3.	Within the last 8 years, o	did you ever live v	vith a spouse or i	egal equivalent in a	community proper	ty state or territory? (Community property
state	es and territories include A	rizona, California, I	daho, Louisiana, N	Nevada, New Mexico,	Puerto Rico, Texas,	Washington and Wisco	onsin.)

- Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1	Joseph D. Giles
Debtor 2	Poppy M. Giles

Pa	Explain the Sources of You	r Income			
4.	Did you have any income from en Fill in the total amount of income yo If you are filing a joint case and you	u received from all jobs and a	all businesses, including part-	time activities.	ndar years?
	□ No■ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of current year until e date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,938.20	■ Wages, commissions, bonuses, tips	\$11,056.84
		☐ Operating a business		☐ Operating a business	
	r last calendar year: nuary 1 to December 31, 2019)	■ Wages, commissions, bonuses, tips	\$50,114.01	■ Wages, commissions, bonuses, tips	\$19,780.66
		☐ Operating a business		☐ Operating a business	
		☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$529,213.87
		☐ Operating a business		Operating a business	
	r the calendar year before that: anuary 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$47,160.60	■ Wages, commissions, bonuses, tips	\$17,000.00
		☐ Operating a business		☐ Operating a business	
		☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$1,004,563.00
		☐ Operating a business		Operating a business	
5.	Did you receive any other income Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross incoming No Yes. Fill in the details.	er that income is taxable. Exa pensions; rental income; inter e and you have income that y	amples of other income are a sest; dividends; money collect ou received together, list it o	ted from lawsuits; royalties; ar nly once under Debtor 1.	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2019)	Progressive Insurance. In December, 2019, we received \$3318.73 from Progressive Insurance, our automobile insurer, for the settlement of a property damage claim that we had when our 2013 Toyota 4-Runner was damaged when it struck a deer.	\$3,318.73		
	Progressive Insurance. In October, 2019, we received \$2858.63 from Progressive Insurance, our automobile insurer, for the settlement of a property damage claim that we had when our 2008 Pontiac Grand Prix was damaged when it struck a deer.	\$2,858.63		
	Progressive Insurance. In September, 2019, we received \$4849.39 from Progressive Insurance, our automobile insurer, for the settlement of a property damage claim that we had when our 2013 Toyota 4-Runner was damaged when it struck a deer.	\$4,849.39		

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	Progressive Insurance. In September, 2019, we received \$11,130.11 from Progressive Insurance, our automobile insurer, for a settlement of a property damage claim that we had when our 2013 Nissan Titan pick-up truck was totaled in an automobile accident.	\$11,130.11		
	Fina's Diner. Debtors sold food products from their former business, G4 High Country Cuisine, LLC, to Fina's Diner for \$300.00 in October, 2019.	\$300.00		
For the calendar year before that: (January 1 to December 31, 2018)	Progressive Insurance. In November, 2018, we received \$2702.44 from Progressive Insurance, our automobile insurer, for the settlement of a property damage claim that we had when our 2013 Toyota 4-Runner was damaged when it struck a deer.	\$2,702.44		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

- Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
 - Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

	btor 1 Joseph D. G btor 2 Poppy M. Gi			Cas	e number (if known)	20-10747-j7
		90 days before you filed Go to line 7. List below each credit	domestic support obligatior	ay any creditor a tota I of \$600 or more and	d the total amount	you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and	d Address	Dates of payment	Total amount	Amount you still owe	Was this payment for
	Citizens One Auto P.O. Box 42033 Providence, RI 02		Dec. 19, 2019 - \$263.48 Jan. 16, 2020 - \$263.48 Jan. 30, 2020 - \$526.96 These payments constitute monthly payments that we paid to creditor, pursuant to a secured vehicle loan that we have with creditor on our 2013 Toyota 4-Runner.	\$1,053.92	\$7,227.14	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
7.	Insiders include your r of which you are an of	elatives; any general pa ficer, director, person in	control, or owner of 20% c	neral partners; partne or more of their voting	erships of which yo g securities; and ar	was an insider? u are a general partner; corporations by managing agent, including one for s, such as child support and
	_	nents to an insider.				
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	insider? Include payments on o	you filed for bankrupton debts guaranteed or cos		rments or transfer a	nny property on a	ccount of a debt that benefited an
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal	Actions, Repossession	ns and Foreclosures			
9.	Within 1 year before	you filed for bankruptoncluding personal injury	cy, were you a party in ar cases, small claims action			
	□ No					
	□ No■ Yes. Fill in the de	etails.				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Joseph D. Giles Debtor 2 Poppy M. Giles

Case number (if known) 20-10747-j7

Case title Case number	Nature of the case	Court or agency	Status of the o	case
Shamrock Foods Company, an Arizona corporation vs. G4 High Country Restaurant, d/b/a High Country Restaurant; Latitude 37 Venture, LLC, d/b/a Shooters and Shenanigans; and Michelle Giles, J. Does 1-10; XYZ Corporations or Associations. No. C202000591	Complaint for Breach of Contract, Unjust Enrichment and A.R.S. Section 12-671	Pima County Superior Court 110 W. Congress Street Tucson, AZ 85701	Pending On appeal Concluded Case is pend	ding.
BBVA USA, f/k/a Compass Bank vs. G4 High Country Cuisine, LLC; Joseph D. Giles; and Poppy Michelle Giles No. D-117-CV-2019-00580	Complaint for Breach of Contract, Foreclosure of Deed of Trust, Appointment of Special Receiver, Writ of Replevin, and Collateral Recovery,	First Judicial District C P.O. Drawer 40 Tierra Amarilla, NM 875	☐ On appeal	ding.
Manuel G. Martinez vs. Michelle Giles M-191-CV-2017-00008	Complaint for Failure to Pay Advertising Services	Rio Arriba County Magistrate Court P.O. Box 538 Chama, NM 87520	•	ntered against or \$3577.00 on 2017.
Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed, foreclosed	I, garnished, attached, s	seized, or levied?
Creditor Name and Address	Describe the Property		Date	Value of the
Ordano Hame and Address			Date	property
	Explain what happene	d		
Within 90 days before you filed for bankru accounts or refuse to make a payment be ■ No □ Yes. Fill in the details.		cluding a bank or financial ins	stitution, set off any am	ounts from your
Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		erty in the possession of an	assignee for the benefit	of creditors, a
■ No				

10.

11.

12.

Pa	rt 5: List Certain Gifts and Contribution	ns						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:	d						
14.	No		lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or							
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value			
Pa	rt 6: List Certain Losses							
15.	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	uptcy or	since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster			
	Describe the property you lost and how the loss occurred		be any insurance coverage for the loss the amount that insurance has paid. List pending	Date of your loss	Value of property			
			ace claims on line 33 of Schedule A/B: Property.					
	2013 Toyota 4-Runner. This vehicle was damaged when it struck a deer.	Progre	essive Insurance, our automobile er, paid us \$3318.73 for this loss.	December, 2019	\$3,568.73			
	2008 Pontiac Grand Prix. This vehicle was damaged when it struck a deer.		essive Insurance, our automobile er, paid us \$2858.63 for this loss.	October, 2019	\$3,108.63			
	2013 Toyota 4-Runner. This vehicle was damaged when it struck a deer.	essive Insurance, our automobile er, paid us \$4849.39 for this loss.	September, 2019	\$5,099.39				
	2013 Nissan Titan pick-up truck. This vehicle was totaled in an automobile accident.	This vehicle was totaled in an insurer, paid us \$11,130.11 for this loss.			\$11,380.11			
	2013 Toyota 4-Runner. This vehicle was damaged when it struck a deer.		essive Insurance, our automobile er, paid us \$2702.44 for this loss.	November, 2018	\$2,952.44			
Pa :	t 7: List Certain Payments or Transfe Within 1 year before you filed for bankr		d you or anyone else acting on your behalf pay o	or transfer any prope	rty to anyone you			
	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition		ng a bankruptcy petition? s, or credit counseling agencies for services required	d in your bankruptcy.	- ·			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	William Ivry Attorney at Law P.O. Box 263 Santa Fe, NM 87504 ivrygall@cybermesa.com	We paid Mr. Ivry a retainer fee \$1750.00 for legal services that providing in representing us in Chapter 7 bankruptcy proceed	at he is n this	March, 2020	\$1,750.00
	William Ivry Attorney at Law P.O. Box 263 Santa Fe, NM 87504 ivrygall@cybermesa.com	We paid Mr. Ivry \$500.00 for representing us in a foreclosu lawsuit that BBVA USA filed a us.		February, 2020	\$500.00
	Dollar Learning Foundation, Inc. P.O. Box 568 Northridge, CA 91325 www.Bothcourses.com	We paid Dollar Learning Foun Inc. \$14.99 for credit counselin services that it provided to us the filing of this Chapter 7 bar petition.	ng prior to	March 23, 2020 and March 24, 2020	\$14.99
17	Within 1 year before you filed for bankruptcy,			or transfer any prope	erty to anyone who
.,.	promised to help you deal with your creditors Do not include any payment or transfer that you I No Yes. Fill in the details.		rs?		
	Do not include any payment or transfer that you I No			Date payment or transfer was made	Amount of payment
	No ☐ Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already ☐ No	Description and value of any prop transferred J, did you sell, trade, or otherwise transiness or financial affairs? Je as security (such as the granting of a security)	erty sfer any pro	or transfer was made perty to anyone, othe	payment er than property
	No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus linclude both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. Person Who Received Transfer Address	Description and value of any prop transferred J, did you sell, trade, or otherwise transiness or financial affairs? Je as security (such as the granting of a security)	perty sefer any property interest	or transfer was made perty to anyone, other st or mortgage on your any property or streetived or debts	payment er than property
	No ☐ Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already ☐ No ☐ Yes. Fill in the details. Person Who Received Transfer	Description and value of any prop transferred 7, did you sell, trade, or otherwise transiness or financial affairs? le as security (such as the granting of a slisted on this statement. Description and value of	perty security interes Describe payments	or transfer was made perty to anyone, other st or mortgage on your any property or streetived or debts	payment er than property er property). Do not Date transfer was
18.	No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Fina's Diner 2298 State Highway 17	Description and value of any prop transferred y, did you sell, trade, or otherwise transiness or financial affairs? le as security (such as the granting of a slisted on this statement. Description and value of property transferred Debtors sold food products from their former business, G4 High Country Cuisine, LLC, to Fina's Diner for \$300.00 in October, 2019.	Describe payments paid in ex	or transfer was made perty to anyone, other st or mortgage on your any property or street received or debts schange	payment er than property or property). Do not Date transfer was made October, 2019
18.	No Yes. Fill in the details. Person Who Was Paid Address Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Fina's Diner 2298 State Highway 17 Chama, NM 87520 Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-proteins)	Description and value of any prop transferred y, did you sell, trade, or otherwise transiness or financial affairs? le as security (such as the granting of a slisted on this statement. Description and value of property transferred Debtors sold food products from their former business, G4 High Country Cuisine, LLC, to Fina's Diner for \$300.00 in October, 2019.	Describe payments paid in ex	or transfer was made perty to anyone, other st or mortgage on your any property or streetived or debts schange	payment er than property or property). Do not Date transfer was made October, 2019

Par	t 8: List of Certain Financial Accounts, In	nstrum	nents, Safe Deposi	t Boxes, and S	torage Uni	its		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. □ No							
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number		Type of account or instrument		Date account was closed, sold, moved, or transferred		Last balance fore closing or transfer
	Washington Federal Bank 541 Terrace Avenue Chama, NM 87520	XXXX-7184		☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other		There was \$0.00 in this bank account when this account was closed in December, 2019.		\$0.00
	Wells Fargo Bank P.O. Box 6995 Portland, OR 97228	XXX	(X-5674	☐ Checking ☐ Savings ☐ Money Ma ☐ Brokerage ☐ Other		There was (-\$440.88) in this bank account when this account was closed in July, 2019.		\$0.00
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	l year l	·					,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents		o you still ave it?
22.	Have you stored property in a storage unit ■ No □ Yes. Fill in the details.	t or pla	ce other than you	r home within	1 year befo	re you filed for bankrupt	cy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents		o you still ave it?
Par	t 9: Identify Property You Hold or Control	ol for S	omeone Else					
23.	Do you hold or control any property that so for someone.	omeor	ne else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or	hold in trust
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the proj (Number, Street, City, S Code)		Describe	the property		Value

	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	G4 High Country Cuisine, LLC -defunct limited liability company	2289 S. New Mexico 17 Chama, NM 87520	Restaurant equipment and liquor license. G4 High Country Cuisine, LLC was Debtors' former business. This business owns restaurant equipment and a liquor license. Debtors have possession of this restaurant equipment and liquor license.	\$429,000.00
Pai	t 10: Give Details About Environmental Inform	aation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	• • • • • • • • • • • • • • • • • • • •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	nental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Cor	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time	
	■ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	tive of a corporation		
	☐ An owner of at least 5% of the voting of	r equity securities of a corporation		

Debtor 2 Poppy M. Giles		Case number (i	20-10747-j7		
☐ No. None of the above applies. Go to	o Part 12.				
Yes. Check all that apply above and t	ill in the details below for each business.				
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer	Employer Identification number Do not include Social Security number or ITIN.		
(Number, Street, City, State and Zir Code)	Name of accountant or bookkeeper	Dates bus	siness existed		
G4 High Country Cuisine, LLC, a/k/a	Restaurant and liquor store	EIN:	81-3198451		
High Country Restaurant 2289 S. New Mexico 17 Chama, NM 87520	Macias, Guiterrez & Company, CPA's P.O. Box 712 Tierra Amarilla, NM 87575	From-To	August, 2016 - October, 2019		
Latitude 37 Ventures, LLC, d/b/a	Restaurant	EIN:	83-4512923		
Shooters and Shenanigans 23 Pike Drive Pagosa Springs, CO 81147	Macias, Gutierrez & Company, CPA's P.O. Box 712 Tierra Amarilla, NM 87575	From-To	June, 2019 - July, 2019		
28. Within 2 years before you filed for bankru institutions, creditors, or other parties.	ptcy, did you give a financial statement to	anyone abou	t your business? Include all financial		
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name	ptcy, did you give a financial statement to Date Issued	anyone abou	t your business? Include all financial		
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.		anyone abou	t your business? Include all financial		
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address		anyone abou	t your business? Include all financial		
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued Financial Affairs and any attachments, and a false statement, concealing property, o	d I declare und r obtaining mo	er penalty of perjury that the answers oney or property by fraud in connection		
institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Fare true and correct. I understand that making with a bankruptcy case can result in fines up to	Date Issued Financial Affairs and any attachments, and a false statement, concealing property, o o \$250,000, or imprisonment for up to 20 y	d I declare und r obtaining mo	er penalty of perjury that the answers oney or property by fraud in connection		
Institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Fare true and correct. I understand that making with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.	Date Issued Financial Affairs and any attachments, and a false statement, concealing property, oo \$250,000, or imprisonment for up to 20	d I declare und r obtaining mo	er penalty of perjury that the answers oney or property by fraud in connection		
Institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Fare true and correct. I understand that making with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph D. Giles Joseph D. Giles	Date Issued Financial Affairs and any attachments, and a false statement, concealing property, o o \$250,000, or imprisonment for up to 20 to 1/s/ Poppy M. Giles Poppy M. Giles	d I declare und r obtaining mo	er penalty of perjury that the answers oney or property by fraud in connection		
Institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Fare true and correct. I understand that making with a bankruptcy case can result in fines up t 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Joseph D. Giles Joseph D. Giles Signature of Debtor 1	Date Issued Financial Affairs and any attachments, and a false statement, concealing property, o o \$250,000, or imprisonment for up to 20 to 1/2 / Poppy M. Giles Poppy M. Giles Poppy M. Giles Signature of Debtor 2 Date April 10, 2020	d I declare und r obtaining mo years, or both.	er penalty of perjury that the answers oney or property by fraud in connection		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).